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CONFIRMATION NO. 8624

<b>SERIAL NUMBER</b> 10/825,870	<b>FILING OR 371(c) DATE</b> 04/16/2004 <b>RULE</b>	<b>CLASS</b> 427	<b>GROUP ART UNIT</b> 1762	<b>ATTORNEY DOCKET NO.</b> 200316700-1	
<b>APPLICANTS</b> Iddys D. Figueroa, Dorado, PR; Orlando Ruiz, Aguadilla, PR;  <b>** CONTINUING DATA *****</b> <i>R.C. O.K.</i> <b>** FOREIGN APPLICATIONS *****</b> <i>R.C. O.K.</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/26/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Adrian Chey R.C.</i> Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> PR	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 79	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 22879					
<b>TITLE</b> System and a method for producing layered oral dosage forms					
<b>FILING FEE RECEIVED</b> 2090	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		